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Bib Data Sheet

CONFIRMATION NO. 9820

<b>SERIAL NUMBER</b> 09/762,876	<b>FILING DATE</b> 06/11/2001 <b>RULE</b>	<b>CLASS</b> 345	<b>GROUP ART UNIT</b> 2673	<b>ATTORNEY DOCKET NO.</b> G334.312-1
<b>APPLICANTS</b> Nereu Gouvea, Paranagua, BRAZIL; Ronaldo Tramujas, Paranagua, BRAZIL; Ricardo Tramujas, Paranagua, BRAZIL;				
<b>** CONTINUING DATA *****</b> <i>YES KN</i> THIS APPLICATION IS A 371 OF PCT/BR99/00047 06/17/1999				
<b>** FOREIGN APPLICATIONS *****</b> <i>YES KN</i> BRAZIL PI9802700-0 08/11/1998 BRAZIL MU7901399-6 05/17/1999				
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED** SMALL ENTITY **</b> ** 07/24/2002				
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met Verified and Acknowledged <i>Kim Nery</i> Examiner's Signature Initials		<b>STATE OR COUNTRY</b> BRAZIL	<b>SHEETS DRAWING</b> 3	<b>TOTAL CLAIMS</b> 6
<b>INDEPENDENT CLAIMS</b> 1				
<b>ADDRESS</b> 00164				
<b>TITLE</b> Matrix analog system for the reproduction of images				
<b>FILING FEE RECEIVED</b> 565	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	



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## \*BIBDATASHEET\*

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## APPLICANTS

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Ronaldo Tramujas, Paranagua, BRAZIL;

Ricardo Tramujas, Paranagua, BRAZIL;

\*\* CONTINUING DATA \*\*\*\*\* *YES KN*

This application is a 371 of PCT/BR99/00047 06/17/1999

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\*\* 07/24/2002

Foreign Priority claimed 35 USC 119 (a-d) conditions met Verified and Acknowledged	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance <i>Kinney Lange</i> Examiner's Signature Initials	STATE OR COUNTRY BRAZIL	SHEETS DRAWING 3	TOTAL CLAIMS 6	INDEPENDENT CLAIMS 1
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## ADDRESS

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55415-1002

## TITLE

Matrix analog system for the reproduction of images

FILING FEE  RECEIVED 565	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____
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